

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.**

(((H14000034240 3)))



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**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.**

To:

Division of Corporations  
Fax Number : (850) 617-6381

From:

Account Name : NORTHWEST REGISTERED AGENT LLC  
Account Number : I20090000081  
Phone : (509) 768-2249  
Fax Number : (323) 544-4790

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: \_\_\_\_\_

**FOREIGN PROFIT/NONPROFIT CORPORATION**

**Helix Systems Florida, Inc.**

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$70.00

RECEIVED

14 FEB 18 PM 3:48

DIVISION OF STATE  
TALLAHASSEE, FLORIDASECRETARY OF STATE  
TALLAHASSEE, FLORIDA

14 FEB 18 AM 11:46

FILED

# Fax Transmission

**To:** Florida SOS

**From:** Shawndale Strite

**Fax:** 18506176381

**Date:** 2/18/2014

**RE:**

**Pages:** 6

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**Comments:**

Fax was originally sent 2/11/14, but your office never received. Please back date to the 11th.

thank you

## COVER LETTER

**TO:** New Filing Section  
Division of Corporations

**SUBJECT:** Helix Systems, Inc.

Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Shawndale Strite

Name of Person

Northwest Registered Agent Service, Inc

Firm/Company

906 West 2nd Ave., STE 100

Address

Spokane, WA 99201

City/State and Zip code

forms@llcagent.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Shawndale Strite

Name of Person

at ( 509 ) 768-2249

Area Code & Daytime Telephone Number

**STREET/COURIER ADDRESS:**

New Filing Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**MAILING ADDRESS:**

New Filing Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- ☒ \$70.00 Filing Fee    ☐ \$78.75 Filing Fee & Certificate of Status    ☐ \$78.75 Filing Fee & Certified Copy    ☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT  
BUSINESS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO  
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.*

1. Helix Systems, Inc.

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

Helix Systems Florida, Inc.

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Alabama

(State or country under the law of which it is incorporated)

3. \_\_\_\_\_

(FEI number, if applicable)

4. 02/25/04

(Date of incorporation)

5. Perpetual

(Duration: Year corp. will cease to exist or "perpetual")

6. \_\_\_\_\_

(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 5531 Powder Plant Lane Bessemer AL 35022

(Principal office address)

(Current mailing address)

8. \_\_\_\_\_

(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Northwest Registered Agent, LLC

Office Address: 3030 N. Rocky Point Dr. STE 150A

Tampa, Florida 33607  
(City) (Zip code)

10. **Registered agent's acceptance:**

*Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.*



Dan Keen-Manager

(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

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TALLAHASSEE FLORIDA

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12. Names and business addresses of officers and/or directors;

A. DIRECTORS

Chairman: SIMON J. FOWEATHER

Address: 5531 POWDER PLANT LANE  
BESSEMER, AL 35022

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

B. OFFICERS

President: Simon Fowweather

Address: 5531 Powder Plant Lane Bessemer AL 35022

Vice President: RICK HUGHES

Address: 5531 POWDER PLANT LANE BESSEMER AL 35022

Secretary: Don Wright

Address: 5531 Powder Plant Lane Bessemer AL 35022

Treasurer: Simon Fowweather

Address: 5531 Powder Plant Lane Bessemer AL 35022

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. Donald A. Wright, Jr.

Signature of Director or Officer

The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

14. DONALD A. WRIGHT, VICE PRESIDENT

(Typed or printed name and capacity of person signing application)

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SECRETARY OF STATE  
TALLAHASSEE FLORIDA

Jim Bennett  
Secretary of State

P.O. Box 5616  
Montgomery, AL 36103-5616

# STATE OF ALABAMA

I, Jim Bennett, Secretary of State of Alabama, having custody of the  
Great and Principal Seal of said State, do hereby certify that

the entity records on file in this office disclose that Helix Systems, Inc. was  
formed in Jefferson County, Alabama on February 25, 2004. The Alabama Entity  
Identification number for this entity is 233-824. I further certify that the records do  
not disclose that said entity has been dissolved, cancelled or terminated.

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SECRETARY OF STATE  
TALLAHASSEE FLORIDA

In Testimony Whereof, I have hereunto set my  
hand and affixed the Great Seal of the State, at the  
Capitol, in the city of Montgomery, on this day.



12/23/2013

Date

A handwritten signature in cursive script, appearing to read 'Jim Bennett', is written over a horizontal line.

20131223000005342

Jim Bennett

Secretary of State